



# **TRICARE**

## ***Your Military Health Plan***

**Health Net Federal Services,  
Inc.**

## ***Beneficiary Education Seminar***



# What is TRICARE?

- DoD's integrated health care delivery system
- Provides health benefits and services to active duty and retired members of the uniformed services, their families, and survivors worldwide
- Available to Army, Navy, Air Force, Marine Corps, Coast Guard, the U.S. Public Health Service (USPHS), and the National Oceanic and Atmospheric Administration (NOAA)

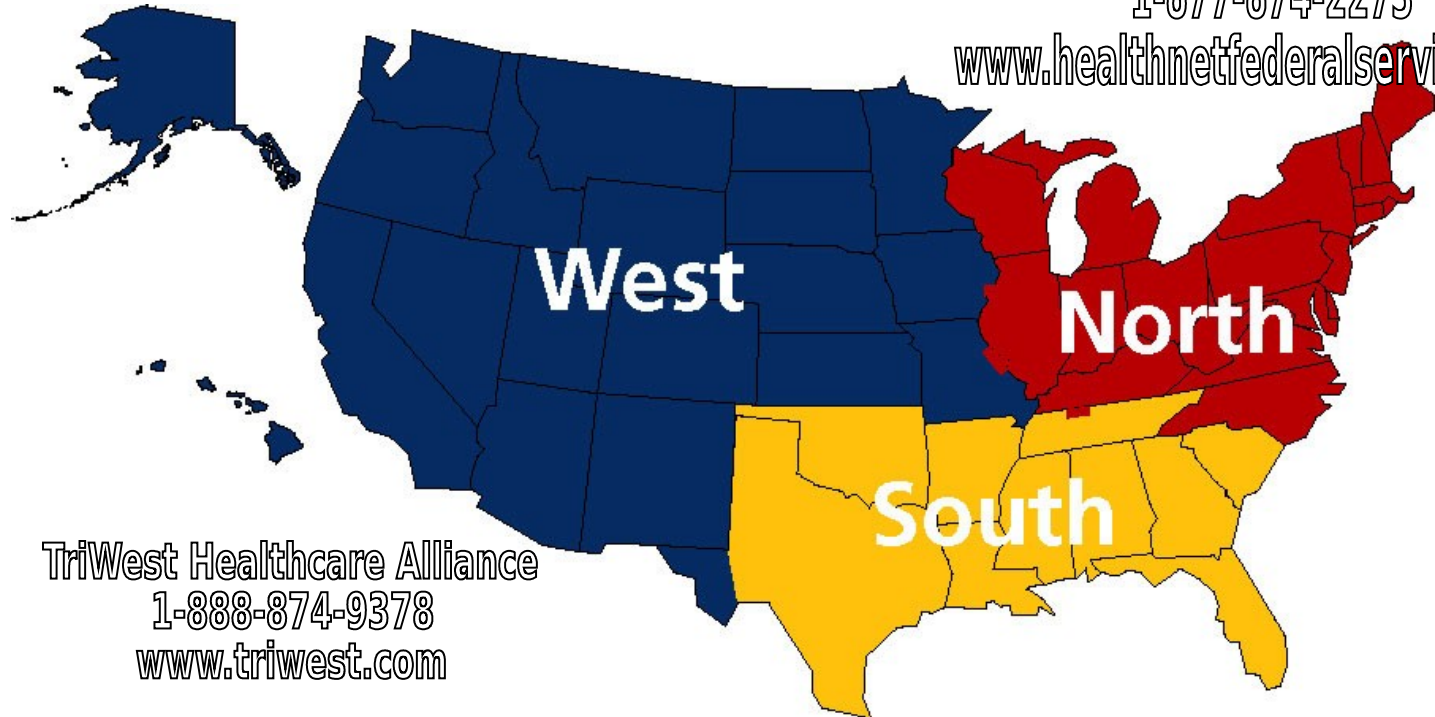


# New TRICARE Regions

Health Net Federal Services

1-877-874-2273

[www.healthnetfederalservices.com](http://www.healthnetfederalservices.com)



TriWest Healthcare Alliance

1-888-874-9378

[www.triwest.com](http://www.triwest.com)

Humana Military Healthcare Services

1-800-444-5445

[www.humana-military.com](http://www.humana-military.com)



# **Who is eligible for TRICARE?**

Active duty service members (ADSMs) and retirees of any of the seven uniformed services

- Reserve Component members on active duty for more than 30 consecutive days (under Federal orders), from any of the seven uniformed services
- Spouses of active duty, retired, and eligible Reserve Component service members



# Updating DEERS Information

- Visit an ID card issuing facility; locate one near you at [www.dmdc.osd.mil/rsi](http://www.dmdc.osd.mil/rsi)
- Call 1-800-538-9552
- Mail changes to:  
Defense Manpower Data Center Support Office  
Attn: COA  
400 Gigling Road  
Seaside, CA 93955-6771
- Make address changes online at:  
[www.tricare.osd.mil/DEERSAddress](http://www.tricare.osd.mil/DEERSAddress)



# Who is eligible for TRICARE?

- Unmarried children (including stepchildren) up to age 21 (or 23 if full-time student) under regular TRICARE
- Past age 21—Mental/Physical incapacity
- Unmarried children remain eligible even if parents divorce or remarry
- Dependent parents and parents-in-law
  - Eligible for primary care in a military treatment facility
  - Depends on availability in the MTF.



# TRICARE Young Adult Eligibility

- **You May Purchase TYA Coverage If You Are All Of The Following:**
  - A dependent of an eligible uniformed service sponsor \*
  - Unmarried
  - At least age 21 (or age 23 if enrolled in a full-time course of study at an approved institution of higher learning and if your sponsor provides at least 50 percent of the financial support), but have not yet reached age 26





# **TYA Eligibility**

---

- Not eligible to enroll in an employer-sponsored health plan offered by your own employer
- Not otherwise eligible for any other TRICARE program coverage
- \*If you are an adult child of a non-activated member of the Selected Reserve of the Ready Reserve or of the Retired Reserve, your sponsor must be enrolled in TRICARE Reserve Select (TRS) or TRICARE Retired Reserve (TRR) for you to be eligible to purchase TYA coverage





# Purchasing Coverage

---

- TYA offers open enrollment, so if you qualify, you may purchase coverage at any time.
- Download the TYA application from the TRICARE and regional contractor's websites.
- Deliver completed applications to a TRICARE Service Center or mail it to your regional contractor.



# TRICARE and Other Health Insurance

TRICARE pays after all other health insurance plans except for:

- Medicaid
- TRICARE supplements
- The Indian Health Service
- Other programs/plans as identified by TMA
- Not required to obtain TRICARE referrals or prior authorization for covered services, except for adjunctive dental care, the PFPWD, and behavioral health care services
- However, you must follow the OHI referral and authorization requirements if applicable



# TRICARE Standard

- Fee-for-service option
- No enrollment required
- Seek care from any TRICARE-authorized provider
- Responsible for annual deductibles and cost-shares—highest out-of-pocket expense
- May have to pay provider then file claim for reimbursement
- May seek care in an MTF on a space-available basis
- Active duty service members are not eligible for TRICARE Standard



# TRICARE Standard

## Costs

- Annual deductible
  - Active duty E-4 and below: \$50 individual/\$100 for family
  - Active duty E-5 and above: \$150 individual/\$300 for family
  - Retirees and families: \$150 individual/\$300 for family
- Cost-shares after deductible has been met
  - Active duty family members: 20% of allowed charges
  - Retirees and their family members: 25% of allowed charges
- May be responsible for up to 15% above the TRICARE allowable charge for services if providers do not participate in TRICARE



# TRICARE Extra vs. Standard

## Extra

- Any TRICARE **network provider**
- Active duty family member: 15% of negotiated rate
- Retirees: 20% of negotiated rate
- Providers will file claims for you
- Not responsible for additional charges for covered benefits

## Standard

- Any TRICARE-**authorized provider**
- Active duty family member: 20% of allowable charge
- Retirees: 25% of allowable charge
- May have to file claims
- Nonparticipating providers may charge up to 15% above allowable charge for services



# Supplemental Insurance

- Health benefit plans that are specifically designed to supplement TRICARE Standard benefits.
- An extensive list of military associations is available at [www.military.com](http://www.military.com) under the Community tab.



# **TRICARE Prime**

---

- Managed care option
- Enrollment required
- Fewer out-of-pocket costs
- Select (or are assigned) a primary care manager (PCM)
- Care received at MTFs and in the civilian preferred provider network
- Guaranteed access standards
- No claims to file





# Enrolling in TRICARE

## **Prime**

Active duty and family members—no enrollment fee

- Retirees—\$260 for individual/\$520 for families
- Enroll by 20<sup>th</sup> of month—effective 1<sup>st</sup> of the next month
- If you enroll after the 20<sup>th</sup> of the month, your enrollment will begin on the 1<sup>st</sup> day of the 2<sup>nd</sup> month after that
- Enrollment is continuous



# Referrals

- TRICARE Prime beneficiaries will be referred to MTF first when it can provide the specialty services needed. Call 1-877-TRICARE (1-877-874-2273) for specific information about the MTFs in your TRICARE Prime service area
- Specialty care referrals will be approved for a specific length of time and number of visits
- Follow the appropriate procedure for specialty referrals to avoid responsibility for charges other than your cost-shares
- If you have other health insurance, you must follow the network referrals rules for that carrier



# TRICARE Comparison Chart

	TRICARE Prime/ Prime Remote	TRICARE Standard	TRICARE Extra
Type of Program	<b>Managed Care, HMO-like</b>	<b>Fee-for-service program</b>	<b>Preferred Provider Option</b>
Availability	<b>TRICARE Prime Service Areas/Prime Networks</b>	<b>Throughout U.S. and overseas</b>	<b>Throughout U.S. and overseas</b>
Enrollment/ Fees	<b>Required/ ADFM: None Retirees: \$260 individual/ \$520 family</b>	<b>Not Required/ None</b>	<b>Not Required/ None</b>
Costs	<b>ADFM: None Retirees: Civilian co-pays</b>	<b>Deductible and cost shares ADFM: 20%, Retirees: 25%</b>	<b>Deductible and cost shares ADFM: 15%, Retirees: 20%</b>
Provider Choices	<b>MTF's and Network Providers</b>	<b>TRICARE authorized provider Space-A at MTF</b>	<b>TRICARE Network Provider Space-A and MTF</b>
Primary Care Manager (PCM)	<b>All care coordinated through a PCM</b>	<b>No PCM self-managed care</b>	<b>No PCM self-managed care</b>
Referral and Auth Requirement	<b>PCM referrals required for specialty care, some prior-authorization requirements</b>	<b>Self-referred care Some prior-authorization requirements</b>	<b>Self-referred care Some prior-authorization requirements</b>

# Catastrophic Cap

- ADFMs using TRICARE Standard—  
\$1,000 per fiscal year
- All other beneficiaries using TRICARE Standard (retirees, family members of retirees, survivors, former spouses)
  - \$3,000 per fiscal year



# Enrollment Portability

- Transfer TRICARE Prime enrollment from one TRICARE Region to another
  - Active duty enrollees and their families have unlimited transfers without a break in coverage
  - Retirees and their families may transfer twice in a single enrollment year as long as second transfer is back to the original enrollment location
- Select a new PCM in the new region
- Update your new address in DEERS



# Nonemergency Health Care While Traveling

- All routine medical care should be taken care of before you depart or delayed until you return and can see your PCM
- For out-of-area urgent/acute care, you must coordinate with your PCM or Health Net for an authorization before seeking care
- For out-of-area emergency care, call 911 or go to the nearest emergency room (civilian or military)



# Emergency Care

- Call 911
- Visit nearest emergency room
- Notify your PCM or Health Net as soon as possible of any emergency admission so that your follow-on care can be coordinated (if enrolled in TRICARE Prime)
- A family member can call on your behalf





# TRICARE Prime Point-of-Service (POS) Option

- Freedom to use any TRICARE-authorized provider
- In or out of network—no referrals needed
- Nonavailability statement is not necessary
- Subject to deductibles and cost-shares
- Point-of-service option is more costly to the TRICARE Prime enrollee
- Does not apply to active duty service members



# **POS Cost-shares and Deductibles**

- Annual outpatient deductibles are \$300 for an individual and \$600 for family
- 50% cost-shares for outpatient and inpatient claims
- Excess charges up to 15% over the allowed amount
- The annual catastrophic cap does not apply to your out-of-pocket expenses under the POS option



# **TRICARE Dental**

---

- Active Duty Plan is through MetLife
- 1-855-638-8371
- Retiree Plan is through through Delta Dental
- 1-888-838-8737 or [www.trdp.org](http://www.trdp.org)
- Fee is based off of your location.



# TRICARE Pharmacy

Type of Pharmacy	Generic	Brand Name	Non-Formulary
<b>MTF</b> (up to a 90-day supply)	\$0	\$0	\$0*
<b>TMOP</b> (up to a 90-day supply)	\$0	\$9	\$25
<b>Network Retail</b> (up to a 30-day supply)	\$5	\$12	\$25
<b>Non-network Retail Pharmacy</b> (up to a 30-day supply)	† <b>Non-TRICARE Prime: \$12 or 20%</b> † <b>TRICARE Prime: 50% cost-share</b>	† <b>Non-TRICARE Prime: \$12 or 20%</b> † <b>TRICARE Prime: 50% cost-share</b>	† <b>Non-TRICARE Prime: \$25 or 20%</b> † <b>TRICARE Prime: 50% cost-share</b>

\*Not available in the MTF unless medical necessity is established.

†Deductibles apply

**Reserve Component: Benefits for Reserve Component Family Members**



# TRICARE For Life

- TFL is administered nationally by Wisconsin Physicians service.
- 1-866-773-0404 or [www.tricare4u.com](http://www.tricare4u.com)
- TFL is for all Medicare/TRICARE beneficiaries regardless of age, provided they have Medicare Part A and Medicare Part B.
- It's your responsibility to update DEERS
- Put simply, TRICARE pays second after Medicare for most services.



# Certificate Of Credible Coverage

---

- Shows that you were covered by TRICARE
- Request certificates in writing from:  
Defense Manpower Data Center Support Office  
Attn: Certificate Of Credible coverage  
400 Gigling Road  
Seaside, CA 93955-6771
- For more information call, 1-800-538-9552



# QUESTIONS

- **Thank You For Your Time Today.**

